Signature



		PTO/SB/05 (4/98)
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LITH ITY	Attorney Docket No. MT22_1559	0)

UTILITY PATENT APPLICATION **TRANSMITTAL**

Attorr	ney Docket No.	MI22-1559				2
First i	Inventor or App	olication Identifier	Craig	M.	Carpenter	Δ,
Title	Chemical Vap	or Deposition A	pparatuse	s and	Deposition Me	t H C

(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b)) Expres	s Mail Label No. EL465855526US				
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.	Assistant Commissioner for Patents ON COMMISSIONER FOR Patents ADDRESS TO: Box Patent Application UNAShington, DC 20231				
1. X * Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing) 2. X Specification [Total Pages 28] - Descriptive title of the Invention - Cross References to Related Applications - Statement Regarding Fed sponsored R & D - Reference to Microfiche Appendix	5. Microfiche Computer Program (Appendix) 6. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. Computer Readable Copy b. Paper Copy (identical to computer copy) c. Statement verifying identity of above copies				
- Background of the Invention	ACCOMPANYING APPLICATION PARTS				
- Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure 3.	13. Statement(s) Status still proper and desired 14. Certified Copy of Priority Document(s) (if foreign priority is claimed) 15. X Other: A Check in the amount of \$1,198.00				
Continuation Divisional Continuation-In-part (CIP) of prior application No: Prior application information: Examiner Group / Art Unit: For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.					
17. CORRESPONDENCE ADDRESS					
Customer Number or Bar Code Labe! O21597 or Correspondence address below (Insert Customer No. or Attach bar code label here)					
Name					
Address					
City State	Zip Code				
Country Telephone	Fax				
Name (Print/Type) James E. Lake	Registration No. (Attorney/Agent) 44,854				

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

Date

FEE TRANSMITTAL		Complete if Known			
LEE IVANO	WILLIAL	Application Number	Filed Herewith		
for FY 1	999	Filing Date	Filed Herewith		
Patent fees are subject to annual revision. Small Entity payments <u>must</u> be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12.		First Named Inventor	Craig M. Carpenter		
		Examiner Name	Unknown		
otherwise large only rest must be pull ose round in orderes.	Group / Art Unit	Unknown			
TOTAL AMOUNT OF PAYMENT	(\$) 1,198.00	Attorney Docket No.	MI22-1559		

METHOD OF PAYMENT (check one)	FEE CALCULATION (continued)			
1. X The Commissioner is hereby authorized to charge indicated fees and credit any over payments to: Deposit	3. ADDITIONAL FEES Large Entity Small Entity Fee Fee Fee Fee Code (\$) Code (\$)	Fee Paid		
Account 23-0925	105 130 205 65 Surcharge-late filing fee or oath	0.00		
Number Deposit Account Name Wells, St. John, et al	127 50 227 25 Surcharge - late provisional filling fee or cover sheet.	0.00		
Charge Any Additional	139 130 139 130 Non-English specification	0.00		
Fee Required Under	147 2,520 147 2,520 Forfiling a request for reexamination	0.00		
37 CFR 1.16 and 1 17	112 920* 112 920* Requesting publication of SIR prior to Examiner action	0.00		
2. X Payment Enclosed: X Check Money Order Other	113 1,840* 113 1,840* Requesting publication of SIR after Examiner action	0.00		
	115 110 215 55 Extension for reply within first month	0.00		
FEE CALCULATION	116 380 216 190 Extension for reply within second month	0.00		
1. BASIC FILING FEE	117 870 217 435 Extension for reply within third month	0.00		
Large Entity Small Entity Fee Fee Fee Fee Fee Description Fee Paid	118 1,360 218 680 Extension for reply within fourth month	0.00		
Code (\$) Code (\$)	128 1,850 228 925 Extension for reply within fifth month	0.00		
101 760 201 380 Utility filing fee 106 310 206 155 Design filing fee	119 300 219 150 Notice of Appeal	0.00		
107 480 207 240 Plantfilling fee	120 300 220 150 Filing a brief in support of an appeal	0.00		
108 760 208 380 Reissue filing fee	121 260 221 130 Request for oral hearing	0.00		
114 150 214 75 Provisional filing fee	138 1,510 138 1,510 Petition to institute a public use proceeding	0.00		
<u> </u>	140 110 240 55 Petition to revive - unavoidable	0.00		
SUBTOTAL (1) (\$) 710.00	141 1,210 241 605 Petition to revive - unintentional	0.00		
2. EXTRA CLAIM FEES	142 1,210 242 605 Utility issue fee (or reissue)	0.00		
Fee from Extra Claims below Fee Paid	143 430 243 215 Design issue fee	0.00		
Total Claims 36 -20** = 16 X 18.00 = 288.00	144 580 244 290 Plantissue fee	0.00		
Independent 5 -3** = 2 x 80.00 = 160.00	122 130 122 130 Petitions to the Commissioner	0.00		
Multiple Dependent = 0.00	123 50 123 50 Petitions related to provisional applications	0.00		
**or number previously paid, if greater; For Reissues, see below Large Entity Small Entity	126 240 126 240 Submission of Information Disclosure Stmt	0.00		
Fee Fee Fee Fee Description	581 40 581 40 Recording each patent assignment per	0.00		
Code (\$) Code (\$)	property (times number of properties) 146 760 246 380 Filing a submission after final rejection	40.00		
103 18 203 9 Claims in excess of 20 102 78 202 39 Independent claims in excess of 3	146 760 246 380 Filing a submission after final rejection (37 CFR 1.129(a))	0.00		
102 78 202 39 Independent claims in excess of 3 104 260 204 130 Multiple dependent claim, if not paid	149 760 249 380 For each additional invention to be examined (37 CFR 1.129(b))			
109 78 209 39 ** Reissue indenpendent claims over original patent	Other fee (specify)	0.00		
110 18 210 9 ** Reissue claims in excess of 20 and over original patent	Other fee (specify)	0.00		
SUBTOTAL (2) (\$) 448.00	*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 40.			

SUBMITTED BY			Complete (ifapplicable)		
Typed or James E. Lake Printed Name Wells, St. John, Roberts, Gregory & Matkin, P.S.			Reg. Number	44,854	
Signature	-fm 7/m	Date	15 Mer of	Deposit Account User ID	23-0925

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